

**Introduced by Senators Correa and Aanestad**

February 21, 2008

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An act to amend Sections 3041, 3041.1, 3041.2, 3041.3, 3056, 3057, and 3110 of the Business and Professions Code, relating to optometry.

**LEGISLATIVE COUNSEL'S DIGEST**

SB 1406, as introduced, Correa. Optometry.

Existing law, the Optometry Practice Act, creates the State Board of Optometry, which licenses optometrists and regulates their practice. The act defines the practice of optometry as including the prevention and diagnosis of disorders and dysfunctions of the visual system, and the treatment and management of certain disorders and dysfunctions of the visual system. The act also prescribes certain eye or eye appendage conditions for which an optometrist who is certified to use therapeutic pharmaceutical agents may diagnose and treat, as specified.

This bill would revise and recast those provisions to instead provide that an optometrist who is certified to use therapeutic pharmaceutical agents may diagnose and treat the human eye or eyes, or any part of the visual system, for any of the conditions that he or she is trained and authorized by the board by certification to diagnose and treat, as specified, including minor surgical procedures not requiring general anesthesia.

This bill would require the board, in establishing certification standards for those optometrists, to consult with the clinical faculty of approved California schools of optometry and other interested parties. The bill would also revise and recast provisions related to licensees who graduated from a California accredited school of optometry prior to January 1, 1996, and would make other related and conforming changes.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1     SECTION 1. Section 3041 of the Business and Professions  
2     Code is amended to read:  
3     3041. (a) The practice of optometry includes the prevention  
4     and diagnosis of disorders and dysfunctions of the visual system,  
5     and the treatment and management of ~~certain~~ disorders and  
6     dysfunctions of the visual system, as well as the provision of  
7     rehabilitative optometric services, and is the doing of any or all of  
8     the following:  
9     (1) The examination of the human eye or eyes, or its or their  
10    appendages, and the analysis of the human vision system, either  
11    subjectively or objectively.  
12    (2) The determination of the powers or range of human vision  
13    and the accommodative and refractive states of the human eye or  
14    eyes, including the scope of its or their functions and general  
15    condition.  
16    (3) The prescribing or directing the use of, or using, any optical  
17    device in connection with ocular exercises, visual training, vision  
18    training, or orthoptics.  
19    (4) The prescribing of contact and spectacle lenses for, or the  
20    fitting or adaptation of contact and spectacle lenses to, the human  
21    eye, including lenses ~~which~~ *that* may be classified as drugs or  
22    devices by any law of the United States or of this state.  
23    (5) The use of topical pharmaceutical agents ~~for the sole purpose~~  
24    ~~of the examination of the human eye or eyes for any disease or~~  
25    ~~pathological condition. The topical pharmaceutical agents shall~~  
26    ~~include mydriatics, cycloplegics, anesthetics, and agents for the~~  
27    ~~reversal of mydriasis.~~  
28    (b) ~~(1)~~ An optometrist who is certified to use therapeutic  
29    pharmaceutical agents, pursuant to Section 3041.3, may also  
30    diagnose and ~~exclusively~~ treat the human eye or eyes, or any ~~of~~  
31    ~~its appendages part of the visual system~~, for all of the ~~following~~  
32    ~~conditions: he or she is trained and authorized by the board by~~  
33    ~~certification to diagnose and treat.~~  
34    (A) ~~Through medical treatment, infections of the anterior~~  
35    ~~segment and adnexa, excluding the lacrimal gland, the lacrimal~~

1 ~~drainage system and the sclera. Nothing in this section shall~~  
2 ~~authorize any optometrist to treat a person with AIDS for ocular~~  
3 ~~infections.~~

4 ~~(B) Ocular allergies of the anterior segment and adnexa.~~

5 ~~(C) Ocular inflammation, nonsurgical in cause, limited to~~  
6 ~~inflammation resulting from traumatic iritis, peripheral corneal~~  
7 ~~inflammatory keratitis, episcleritis, and unilateral nonrecurrent~~  
8 ~~nongranulomatous idiopathic iritis in patients over 18 years of age.~~  
9 ~~Unilateral nongranulomatous idiopathic iritis recurring within one~~  
10 ~~year of the initial occurrence shall be referred to an~~  
11 ~~ophthalmologist. An optometrist shall consult with an~~  
12 ~~ophthalmologist if a patient has a recurrent case of episcleritis~~  
13 ~~within one year of the initial occurrence. An optometrist shall~~  
14 ~~consult with an ophthalmologist if a patient has a recurrent case~~  
15 ~~of peripheral corneal inflammatory keratitis within one year of the~~  
16 ~~initial occurrence.~~

17 ~~(D) Traumatic or recurrent conjunctival or corneal abrasions~~  
18 ~~and erosions.~~

19 ~~(E) Corneal surface disease and dry eyes.~~

20 ~~(F) Ocular pain, not related to surgery, associated with~~  
21 ~~conditions optometrists are authorized to treat.~~

22 ~~(G) Pursuant to subdivision (f), primary open-angle glaucoma~~  
23 ~~in patients over 18 years of age.~~

24 ~~(2) For purposes of this section, “treat” means the use of~~  
25 ~~therapeutic pharmaceutical agents, as described in subdivision (c);~~  
26 ~~and the procedures described in subdivision (e).~~

27 ~~(c) In diagnosing and treating any of the conditions listed in~~  
28 ~~subdivision (b) he or she is trained and authorized by the board~~  
29 ~~by certification to diagnose and treat, an optometrist certified to~~  
30 ~~use therapeutic pharmaceutical agents pursuant to Section 3041.3;~~  
31 ~~may use all of the following any therapeutic pharmaceutical agents~~  
32 ~~exclusively: agent he or she determines, in the exercise of his or~~  
33 ~~her professional judgment, to be necessary.~~

34 ~~(1) All of the topical pharmaceutical agents listed in paragraph~~  
35 ~~(5) of subdivision (a) as well as topical miotics for diagnostic~~  
36 ~~purposes.~~

37 ~~(2) Topical lubricants.~~

38 ~~(3) Topical antiallergy agents. In using topical steroid~~  
39 ~~medication for the treatment of ocular allergies, an optometrist~~  
40 ~~shall do the following:~~

1     (A) Consult with an ophthalmologist if the patient's condition  
2     worsens 72 hours after diagnosis.

3     (B) Consult with an ophthalmologist if the inflammation is still  
4     present three weeks after diagnosis.

5     (C) Refer the patient to an ophthalmologist if the patient is still  
6     on the medication six weeks after diagnosis.

7     (D) Refer the patient to an ophthalmologist if the patient's  
8     condition recurs within three months.

9     (4) Topical antiinflammatories. In using topical steroid  
10    medication for:

11    (A) Unilateral nonrecurrent nongranulomatous idiopathic iritis  
12    or episcleritis, an optometrist shall consult with an ophthalmologist  
13    if the patient's condition worsens 72 hours after the diagnosis, or  
14    if the patient's condition has not resolved three weeks after  
15    diagnosis. If the patient is still receiving medication for these  
16    conditions six weeks after diagnosis, the optometrist shall refer  
17    the patient to an ophthalmologist.

18    (B) Peripheral corneal inflammatory keratitis, excluding  
19    Moorens and Terriens diseases, an optometrist shall consult with  
20    an ophthalmologist if the patient's condition worsens 48 hours  
21    after diagnosis. If the patient is still receiving the medication two  
22    weeks after diagnosis, the optometrist shall refer the patient to an  
23    ophthalmologist.

24    (C) Traumatic iritis, an optometrist shall consult with an  
25    ophthalmologist if the patient's condition worsens 72 hours after  
26    diagnosis and shall refer the patient to an ophthalmologist if the  
27    patient's condition has not resolved one week after diagnosis.

28    (5) Topical antibiotic agents.

29    (6) Topical hyperosmotics.

30    (7) Topical antiglaucoma agents pursuant to the certification  
31    process defined in subdivision (f).

32    (A) The optometrist shall not use more than two concurrent  
33    topical medications in treating the patient for primary open-angle  
34    glaucoma. A single combination medication that contains two  
35    pharmacological agents shall be considered as two medications.

36    (B) The optometrist shall refer the patient to an ophthalmologist  
37    if requested by the patient, if treatment goals are not achieved with  
38    the use of two topical medications or if indications of narrow-angle  
39    or secondary glaucoma develop.

1     ~~(C) If the glaucoma patient also has diabetes, the optometrist~~  
2     ~~shall consult in writing with the physician treating the patient's~~  
3     ~~diabetes in developing the glaucoma treatment plan and shall notify~~  
4     ~~the physician in writing of any changes in the patient's glaucoma~~  
5     ~~medication. The physician shall provide written confirmation of~~  
6     ~~those consultations and notifications.~~

7     ~~(8) Nonprescription medications used for the rational treatment~~  
8     ~~of an ocular disorder.~~

9     ~~(9) Oral antihistamines. In using oral antihistamines for the~~  
10    ~~treatment of ocular allergies, the optometrist shall refer the patient~~  
11    ~~to an ophthalmologist if the patient's condition has not resolved~~  
12    ~~two weeks after diagnosis.~~

13    ~~(10) Prescription oral nonsteroidal antiinflammatory agents.~~  
14    ~~The agents shall be limited to three days' use. If the patient's~~  
15    ~~condition has not resolved three days after diagnosis, the~~  
16    ~~optometrist shall refer the patient to an ophthalmologist.~~

17    ~~(11) The following oral antibiotics for medical treatment as set~~  
18    ~~forth in subparagraph (A) of paragraph (1) of subdivision (b):~~  
19    ~~tetracyclines, dicloxacillin, amoxicillin, amoxicillin with~~  
20    ~~clavulanate, erythromycin, clarythromycin, cephalixin,~~  
21    ~~cephadroxil, cefaclor, trimethoprim with sulfamethoxazole,~~  
22    ~~ciprofloxacin, and azithromycin. The use of azithromycin shall be~~  
23    ~~limited to the treatment of eyelid infections and chlamydial disease~~  
24    ~~manifesting in the eyes.~~

25    ~~(A) If the patient has been diagnosed with a central corneal ulcer~~  
26    ~~and the condition has not improved 24 hours after diagnosis, the~~  
27    ~~optometrist shall consult with an ophthalmologist. If the central~~  
28    ~~corneal ulcer has not improved 48 hours after diagnosis, the~~  
29    ~~optometrist shall refer the patient to an ophthalmologist. If the~~  
30    ~~patient is still receiving antibiotics 10 days after diagnosis, the~~  
31    ~~optometrist shall refer the patient to an ophthalmologist.~~

32    ~~(B) If the patient has been diagnosed with preseptal cellulitis~~  
33    ~~or dacryocystitis and the condition has not improved 72 hours after~~  
34    ~~diagnosis, the optometrist shall refer the patient to an~~  
35    ~~ophthalmologist. If a patient with preseptal cellulitis or~~  
36    ~~dacryocystitis is still receiving oral antibiotics 10 days after~~  
37    ~~diagnosis, the optometrist shall refer the patient to an~~  
38    ~~ophthalmologist.~~

1     ~~(C) If the patient has been diagnosed with blepharitis and the~~  
2     ~~patient's condition does not improve after six weeks of treatment,~~  
3     ~~the optometrist shall consult with an ophthalmologist.~~

4     ~~(D) For the medical treatment of all other medical conditions~~  
5     ~~as set forth in subparagraph (A) of paragraph (1) of subdivision~~  
6     ~~(b), if the patient's condition worsens 72 hours after diagnosis, the~~  
7     ~~optometrist shall consult with an ophthalmologist. If the patient's~~  
8     ~~condition has not resolved 10 days after diagnosis, the optometrist~~  
9     ~~shall refer the patient to an ophthalmologist.~~

10    ~~(12) Topical antiviral medication and oral acyclovir for the~~  
11    ~~medical treatment of the following: herpes simplex viral keratitis,~~  
12    ~~herpes simplex viral conjunctivitis, and periorcular herpes simplex~~  
13    ~~viral dermatitis; and varicella zoster viral keratitis, varicella zoster~~  
14    ~~viral conjunctivitis, and periorcular varicella zoster viral dermatitis.~~

15    ~~(A) If the patient has been diagnosed with herpes simplex~~  
16    ~~keratitis or varicella zoster viral keratitis and the patient's condition~~  
17    ~~has not improved seven days after diagnosis, the optometrist shall~~  
18    ~~refer the patient to an ophthalmologist. If a patient's condition has~~  
19    ~~not resolved three weeks after diagnosis, the optometrist shall refer~~  
20    ~~the patient to an ophthalmologist.~~

21    ~~(B) If the patient has been diagnosed with herpes simplex viral~~  
22    ~~conjunctivitis, herpes simplex viral dermatitis, varicella zoster~~  
23    ~~viral conjunctivitis, or varicella zoster viral dermatitis, and if the~~  
24    ~~patient's condition worsens seven days after diagnosis, the~~  
25    ~~optometrist shall consult with an ophthalmologist. If the patient's~~  
26    ~~condition has not resolved three weeks after diagnosis, the~~  
27    ~~optometrist shall refer the patient to an ophthalmologist.~~

28    ~~(C) In all cases, the use of topical antiviral medication shall be~~  
29    ~~limited to three weeks, and the use of oral acyclovir shall be limited~~  
30    ~~to 10 days.~~

31    ~~(13) Oral analgesics that are not controlled substances.~~

32    ~~(14) Codeine with compounds and hydrocodone with~~  
33    ~~compounds as listed in the California Uniform Controlled~~  
34    ~~Substances Act (Section 11000 of the Health and Safety Code et~~  
35    ~~seq.) and the United States Uniform Controlled Substances Act~~  
36    ~~(21 U.S.C. Sec. 801 et seq.). The use of these agents shall be~~  
37    ~~limited to three days, with a referral to an ophthalmologist if the~~  
38    ~~pain persists.~~

39    ~~(d) In any case where this chapter requires that an optometrist~~  
40    ~~consult with an ophthalmologist, the optometrist shall maintain a~~

1 written record in the patient's file of the information provided to  
2 the ophthalmologist, the ophthalmologist's response and any other  
3 relevant information. Upon the consulting ophthalmologist's  
4 request, the optometrist shall furnish a copy of the record to the  
5 ophthalmologist.

6 ~~(e)–~~

7 (d) An optometrist who is certified to use therapeutic  
8 pharmaceutical agents pursuant to Section 3041.3 may also perform  
9 all of the following:

10 ~~(1) Mechanical epilation.~~

11 ~~(2) Ordering of smears, cultures, sensitivities, complete blood~~  
12 ~~count, mycobacterial culture, acid fast stain, and urinalysis.~~

13 ~~(3) Punctal occlusion by plugs, excluding laser, cautery,~~  
14 ~~diathermy, cryotherapy, or other means constituting surgery as~~  
15 ~~defined in this chapter.~~

16 *(1) Minor surgical procedures not requiring general anesthesia*  
17 *and necessary to the diagnosis and treatment of a condition of the*  
18 *eye or visual system.*

19 *(2) Any test or procedure necessary to the accurate diagnosis*  
20 *or treatment of a condition of the eye or visual system.*

21 ~~(4)–~~

22 (3) The prescription of therapeutic contact lenses.

23 ~~(5) Removal of foreign bodies from the cornea, eyelid, and~~  
24 ~~conjunctiva. Corneal foreign bodies shall be nonperforating, be~~  
25 ~~no deeper than the anterior stroma, and require no surgical repair~~  
26 ~~upon removal. Within the central three millimeters of the cornea,~~  
27 ~~the use of sharp instruments is prohibited.~~

28 ~~(6) For patients over 12 years of age, lacrimal~~

29 *(4) Lacrimal irrigation and dilation, excluding probing of the*  
30 *nasal lacrimal tract. The State Board of Optometry shall certify an*  
31 *optometrist to perform this procedure after completing 10 of the*  
32 *procedures under the supervision of an ophthalmologist as*  
33 *confirmed by the ophthalmologist necessary to the accurate*  
34 *diagnosis or treatment of a condition of the eye or visual system.*

35 ~~(7) No injections other than the use of an auto-injector to counter~~  
36 ~~anaphylaxis.~~

37 ~~(f) The State Board of Optometry shall grant a certificate to an~~  
38 ~~optometrist certified pursuant to Section 3041.3 for the treatment~~  
39 ~~of primary open-angle glaucoma in patients over 18 years of age~~  
40 ~~only after the optometrist meets the following requirements:~~

1     ~~(1) Satisfactory completion of a didactic course of not less than~~  
2     ~~24 hours in the diagnosis, pharmacological and other treatment~~  
3     ~~and management of glaucoma. The 24-hour glaucoma curriculum~~  
4     ~~shall be developed by an accredited California school of optometry.~~  
5     ~~Any applicant who graduated from an accredited California school~~  
6     ~~of optometry on or after May 1, 2000, shall be exempt from the~~  
7     ~~24-hour didactic course requirement contained in this paragraph.~~

8     ~~(2) After completion of the requirement contained in paragraph~~  
9     ~~(1), collaborative treatment of 50 glaucoma patients for a period~~  
10    ~~of two years for each patient under the following terms:~~

11    ~~(A) After the optometrist makes a provisional diagnosis of~~  
12    ~~glaucoma, the optometrist and the patient shall identify a~~  
13    ~~collaborating ophthalmologist.~~

14    ~~(B) The optometrist shall develop a treatment plan that considers~~  
15    ~~for each patient target intraocular pressures, optic nerve appearance~~  
16    ~~and visual field testing for each eye, and an initial proposal for~~  
17    ~~therapy.~~

18    ~~(C) The optometrist shall transmit relevant information from~~  
19    ~~the examination and history taken of the patient along with the~~  
20    ~~treatment plan to the collaborating ophthalmologist. The~~  
21    ~~collaborating ophthalmologist shall confirm or refute the glaucoma~~  
22    ~~diagnosis within 30 days. To accomplish this, the collaborating~~  
23    ~~ophthalmologist shall perform a physical examination of the~~  
24    ~~patient.~~

25    ~~(D) Once the collaborating ophthalmologist confirms the~~  
26    ~~diagnosis and approves the treatment plan in writing, the~~  
27    ~~optometrist may begin treatment.~~

28    ~~(E) The optometrist shall use no more than two concurrent~~  
29    ~~topical medications in treating the patient for glaucoma. A single~~  
30    ~~combination medication that contains two pharmacologic agents~~  
31    ~~shall be considered as two medications. The optometrist shall~~  
32    ~~notify the collaborating ophthalmologist in writing if there is any~~  
33    ~~change in the medication used to treat the patient for glaucoma.~~

34    ~~(F) Annually after commencing treatment, the optometrist shall~~  
35    ~~provide a written report to the collaborating ophthalmologist about~~  
36    ~~the achievement of goals contained in the treatment plan. The~~  
37    ~~collaborating ophthalmologist shall acknowledge receipt of the~~  
38    ~~report in writing to the optometrist within 10 days.~~

39    ~~(G) The optometrist shall refer the patient to an ophthalmologist~~  
40    ~~if requested by the patient, if treatment goals are not achieved with~~



1 the use of two topical medications, or if indications of secondary  
2 glaucoma develop. At his or her discretion, the collaborating  
3 ophthalmologist may periodically examine the patient.

4 (H) If the glaucoma patient also has diabetes, the optometrist  
5 shall consult in writing with the physician treating the patient's  
6 diabetes in preparation of the treatment plan and shall notify the  
7 physician in writing if there is any change in the patient's glaucoma  
8 medication. The physician shall provide written confirmation of  
9 the consultations and notifications.

10 (I) The optometrist shall provide the following information to  
11 the patient in writing: nature of the working or suspected diagnosis,  
12 consultation evaluation by a collaborating ophthalmologist,  
13 treatment plan goals, expected followup care, and a description of  
14 the referral requirements. The document containing the information  
15 shall be signed and dated by both the optometrist and the  
16 ophthalmologist and maintained in their files.

17 (3) When the requirements contained in paragraphs (1) and (2)  
18 have been satisfied, the optometrist shall submit proof of  
19 completion to the State Board of Optometry and apply for a  
20 certificate to treat primary open-angle glaucoma. That proof shall  
21 include corroborating information from the collaborating  
22 ophthalmologist. If the ophthalmologist fails to respond within 60  
23 days of a request for information from the State Board of  
24 Optometry, the board may act on the optometrist's application  
25 without that corroborating information.

26 (4) After an optometrist has treated a total of 50 patients for a  
27 period of two years each and has received certification from the  
28 State Board of Optometry, the optometrist may treat the original  
29 50 collaboratively treated patients independently, with the written  
30 consent of the patient. However, any glaucoma patients seen by  
31 the optometrist before the two-year period has expired for each of  
32 the 50 patients shall be treated under the collaboration protocols  
33 described in this section.

34 (5) For purposes of this subdivision, "collaborating  
35 ophthalmologist" means a physician and surgeon who is licensed  
36 by the state and in the active practice of ophthalmology in this  
37 state.

38 (g) Notwithstanding any other provision of law, an optometrist  
39 shall not treat children under one year of age with therapeutic  
40 pharmaceutical agents.

1     ~~(h) Any dispensing of a therapeutic pharmaceutical agent by an~~  
2     ~~optometrist shall be without charge.~~

3     ~~(i) Notwithstanding any other provision of law, the practice of~~  
4     ~~optometry does not include performing surgery. “Surgery” means~~  
5     ~~any procedure in which human tissue is cut, altered, or otherwise~~  
6     ~~infiltrated by mechanical or laser means in a manner not~~  
7     ~~specifically authorized by this chapter. Nothing in the act amending~~  
8     ~~this section shall limit an optometrist’s authority, as it existed prior~~  
9     ~~to the effective date of the act amending this section, to utilize~~  
10    ~~diagnostic laser and ultrasound technology.~~

11    ~~(j) All collaborations, consultations, and referrals made by an~~  
12    ~~optometrist pursuant to this section shall be to an ophthalmologist~~  
13    ~~located geographically appropriate to the patient.~~

14    ~~(5) Injections necessary to the diagnosis and treatment of a~~  
15    ~~condition the optometrist is qualified and certified to diagnose or~~  
16    ~~treat.~~

17    ~~(k)~~

18    ~~(e) An optometrist licensed under this chapter is subject to the~~  
19    ~~provisions of Section 2290.5 for purposes of practicing~~  
20    ~~telemedicine.~~

21    ~~(f) In consultation with the clinical faculty of approved~~  
22    ~~California schools of optometry and other interested parties, the~~  
23    ~~board shall establish by regulation minimum requirements to~~  
24    ~~authorize an optometrist certified pursuant to Section 3041.3 to~~  
25    ~~treat glaucoma.~~

26    SEC. 2. Section 3041.1 of the Business and Professions Code  
27    is amended to read:

28    3041.1. With respect to the practices ~~set forth in subdivisions~~  
29    ~~(b), (d), and (e) of described in~~ Section 3041, optometrists  
30    diagnosing or treating eye disease shall be held to the same  
31    standard of care to which physicians and surgeons and osteopathic  
32    physicians and surgeons are held.

33    SEC. 3. Section 3041.2 of the Business and Professions Code  
34    is amended to read:

35    3041.2. (a) The State Board of Optometry shall, by regulation,  
36    establish educational and examination requirements for licensure  
37    ~~to insure~~ ensure the competence of optometrists to practice  
38    pursuant to subdivision (a) of Section 3041. Satisfactory  
39    completion of the educational and examination requirements shall  
40    be a condition for the issuance of an original certificate of

1 registration under this chapter, on and after January 1, 1980. Only  
2 those optometrists who have successfully completed educational  
3 and examination requirements as determined by the State Board  
4 of Optometry shall be permitted the use of pharmaceutical agents  
5 specified by subdivision (a) of Section 3041.

6 (b) Nothing in this section shall authorize an optometrist issued  
7 an original certificate under this chapter before January 1, 1996,  
8 to use or prescribe therapeutic pharmaceutical agents ~~specified in~~  
9 ~~subdivision (d) of~~ *pursuant to* Section 3041 without otherwise  
10 meeting the requirements of Section 3041.3.

11 SEC. 4. Section 3041.3 of the Business and Professions Code  
12 is amended to read:

13 3041.3. (a) In order to be certified to use therapeutic  
14 pharmaceutical agents and authorized to diagnose and treat the  
15 conditions ~~listed described in subdivisions (b), (d), and (e) of~~  
16 Section 3041, an optometrist shall apply for a certificate from the  
17 board and meet all requirements ~~imposed established~~ by the board  
18 *pursuant to subdivision (b)*.

19 ~~(b) The board shall grant a certificate to use therapeutic~~  
20 ~~pharmaceutical agents to any applicant who graduated from a~~  
21 ~~California accredited school of optometry prior to January 1, 1996,~~  
22 ~~is licensed as an optometrist in California, and meets all of the~~  
23 ~~following requirements:~~

24 ~~(1) Satisfactorily completes a didactic course of no less than 80~~  
25 ~~classroom hours in the diagnosis, pharmacological, and other~~  
26 ~~treatment and management of ocular disease provided by either~~  
27 ~~an accredited school of optometry in California or a recognized~~  
28 ~~residency review committee in ophthalmology in California.~~

29 ~~(2) Completes a preceptorship of no less than 65 hours, during~~  
30 ~~a period of not less than two months nor more than one year, in~~  
31 ~~either an ophthalmologist's office or an optometric clinic. The~~  
32 ~~training received during the preceptorship shall be on the diagnosis,~~  
33 ~~treatment, and management of ocular, systemic disease. The~~  
34 ~~preceptor shall certify completion of the preceptorship.~~  
35 ~~Authorization for the ophthalmologist to serve as a preceptor shall~~  
36 ~~be provided by an accredited school of optometry in California,~~  
37 ~~or by a recognized residency review committee in ophthalmology,~~  
38 ~~and the preceptor shall be licensed as an ophthalmologist in~~  
39 ~~California, board-certified in ophthalmology, and in good standing~~  
40 ~~with the Medical Board of California. The individual serving as~~

1 the preceptor shall schedule no more than three optometrist  
2 applicants for each of the required 65 hours of the preceptorship  
3 program. This paragraph shall not be construed to limit the total  
4 number of optometrist applicants for whom an individual may  
5 serve as a preceptor, and is intended only to ensure the quality of  
6 the preceptorship by requiring that the ophthalmologist preceptor  
7 schedule the training so that each applicant optometrist completes  
8 each of the 65 hours of the preceptorship while scheduled with no  
9 more than two other optometrist applicants.

10 (3) Successfully completes a minimum of 20 hours of  
11 self-directed education.

12 (4) Passes the National Board of Examiners in Optometry's  
13 "Treatment and Management of Ocular Disease" examination or,  
14 in the event this examination is no longer offered, its equivalent,  
15 as determined by the State Board of Optometry.

16 (5) Passes the examination issued upon completion of the  
17 80-hour didactic course required under paragraph (1) and provided  
18 by the accredited school of optometry or residency program in  
19 ophthalmology.

20 (6) When any or all of the requirements contained in paragraph  
21 (1), (4), or (5) have been satisfied on or after July 1, 1992, and  
22 before January 1, 1996, an optometrist shall not be required to  
23 fulfill the satisfied requirements in order to obtain certification to  
24 use therapeutic pharmaceutical agents. In order for this paragraph  
25 to apply to the requirement contained in paragraph (5), the didactic  
26 examination that the applicant successfully completed shall meet  
27 equivalency standards, as determined by the board.

28 (7) Any optometrist who graduated from an accredited school  
29 of optometry on or after January 1, 1992, and before January 1,  
30 1996, shall not be required to fulfill the requirements contained in  
31 paragraphs (1), (4), and (5).

32 (c) The board shall grant a certificate to use therapeutic  
33 pharmaceutical agents to any applicant who graduated from a  
34 California accredited school of optometry on or after January 1,  
35 1996, who is licensed as an optometrist in California, and who  
36 meets all of the following requirements:

37 (1) Passes the National Board of Examiners in Optometry's  
38 national board examination, or its equivalent, as determined by  
39 the State Board of Optometry.

1 ~~(2) Of the total clinical training required by a school of~~  
2 ~~optometry's curriculum, successfully completed at least 65 of those~~  
3 ~~hours on the diagnosis, treatment, and management of ocular,~~  
4 ~~systemic disease.~~

5 ~~(3) Is certified by an accredited school of optometry as~~  
6 ~~competent in the diagnosis, treatment, and management of ocular,~~  
7 ~~systemic disease to the extent authorized by this section.~~

8 ~~(4) Is certified by an accredited school of optometry as having~~  
9 ~~completed at least 10 hours of experience with a board-certified~~  
10 ~~ophthalmologist.~~

11 *(b) In consultation with the clinical faculty of approved*  
12 *California schools of optometry and other interested parties, the*  
13 *board shall establish by regulation minimum requirements to*  
14 *authorize a licensed optometrist to use therapeutic pharmaceutical*  
15 *agents and shall grant a certificate to use therapeutic*  
16 *pharmaceutical agents to any applicant who satisfies those*  
17 *requirements. The board may establish distinct standards for*  
18 *didactic and self-directed education, preceptorship, and*  
19 *examination completion requirements for licensees who graduated*  
20 *from a California accredited school of optometry prior to January*  
21 *1, 1996.*

22 ~~(d)–~~

23 *(c) (1) The board shall grant a certificate to use therapeutic*  
24 *pharmaceutical agents to any applicant who is an optometrist who*  
25 *obtained his or her license outside of California if he or she meets*  
26 *all of the requirements established by the board pursuant to*  
27 *subdivision (b) for an optometrist licensed in California to be*  
28 *certified to use therapeutic pharmaceutical agents.*

29 ~~(1) In order to obtain a certificate to use therapeutic~~  
30 ~~pharmaceutical agents, any optometrist who obtained his or her~~  
31 ~~license outside of California and graduated from an accredited~~  
32 ~~school of optometry prior to January 1, 1996, shall be required to~~  
33 ~~fulfill the requirements set forth in subdivision (b). In order for~~  
34 ~~the applicant to be eligible for the certificate to use therapeutic~~  
35 ~~pharmaceutical agents, the education he or she received at the~~  
36 ~~accredited out-of-state school of optometry shall be equivalent to~~  
37 ~~the education provided by any accredited school of optometry in~~  
38 ~~California for persons who graduate before January 1, 1996. For~~  
39 ~~those out-of-state applicants who request that any of the~~  
40 ~~requirements contained in subdivision (b) be waived based on~~

1 fulfillment of the requirement in another state, if the board  
2 determines that the completed requirement was equivalent to that  
3 required in California, the requirement shall be waived.

4 (2) In order to obtain a certificate to use therapeutic  
5 pharmaceutical agents, any optometrist who obtained his or her  
6 license outside of California and who graduated from an accredited  
7 school of optometry on or after January 1, 1996, shall be required  
8 to fulfill the requirements set forth in subdivision (c). In order for  
9 the applicant to be eligible for the certificate to use therapeutic  
10 pharmaceutical agents, the education he or she received by the  
11 accredited out-of-state school of optometry shall be equivalent to  
12 the education provided by any accredited school of optometry for  
13 persons who graduate on or after January 1, 1996. For those  
14 out-of-state applicants who request that any of the requirements  
15 contained in subdivision (c) be waived based on fulfillment of the  
16 requirement in another state, if the board determines that the  
17 completed requirement was equivalent to that required in  
18 California, the requirement shall be waived.

19 (3) The State Board of Optometry

20 (2) *The board* shall decide all issues relating to the equivalency  
21 of an optometrist's education or training under this subdivision;  
22 and the committee established pursuant to Section 3041.1 shall  
23 recommend protocols for the board to use in this regard, as  
24 described in Section 3041.1.

25 SEC. 5. Section 3056 of the Business and Professions Code is  
26 amended to read:

27 3056. (a) The board may issue a license to practice optometry  
28 to a person who meets all of the following qualifications:

29 (1) Has a degree as a doctor of optometry issued by an accredited  
30 school or college of optometry.

31 (2) Is currently licensed in another state.

32 (3) Is currently a full-time faculty member of an accredited  
33 California school or college of optometry and has served in that  
34 capacity for a period of at least five continuous years.

35 (4) Has attained, at an accredited California school or college  
36 of optometry, the academic rank of professor, associate professor,  
37 or clinical professor, except that the status of adjunct or affiliated  
38 faculty member shall not be deemed sufficient.

39 (5) Has successfully passed the board's jurisprudence  
40 examination.

1 (6) Is in good standing, with no past or pending malpractice  
2 awards or judicial or administrative actions.

3 (7) Has met the minimum continuing education requirements  
4 set forth in Section 3059 for the current and preceding year.

5 (8) Has met the requirements of Section 3041.3 regarding the  
6 use of therapeutic pharmaceutical agents under ~~subdivision (e) of~~  
7 Section 3041.

8 (9) Has never had his or her license to practice optometry  
9 revoked or suspended.

10 (10) Is not subject to denial based on any of the grounds listed  
11 in Section 480.

12 (11) Pays an application fee in an amount equal to the  
13 application fee prescribed by the board pursuant to Section 3152.

14 (12) Files an application on a form prescribed by the board.

15 (b) Any license issued pursuant to this section shall expire as  
16 provided in Section 3146, and may be renewed as provided in this  
17 chapter, subject to the same conditions as other licenses issued  
18 under this chapter.

19 (c) The term “in good standing,” as used in this section, means  
20 that a person under this section:

21 (1) Is not currently under investigation nor has been charged  
22 with an offense for any act substantially related to the practice of  
23 optometry by any public agency, nor entered into any consent  
24 agreement or subject to an administrative decision that contains  
25 conditions placed by an agency upon a person’s professional  
26 conduct or practice, including any voluntary surrender of license,  
27 nor been the subject of an adverse judgment resulting from the  
28 practice of optometry that the board determines constitutes  
29 evidence of a pattern of incompetence or negligence.

30 (2) Has no physical or mental impairment related to drugs or  
31 alcohol, and has not been found mentally incompetent by a  
32 physician so that the person is unable to undertake the practice of  
33 optometry in a manner consistent with the safety of a patient or  
34 the public.

35 SEC. 6. Section 3057 of the Business and Professions Code is  
36 amended to read:

37 3057. (a) The board may issue a license to practice optometry  
38 to a person who meets all of the following requirements:

39 (1) Has a degree as a doctor of optometry issued by an accredited  
40 school or college of optometry.

1 (2) Has successfully passed the licensing examination for an  
2 optometric license in another state.

3 (3) Submits proof that he or she is licensed in good standing as  
4 of the date of application in every state where he or she holds a  
5 license, including compliance with continuing education  
6 requirements.

7 (4) Submits proof that he or she has been in active practice in  
8 a state in which he or she is licensed for a total of at least 5,000  
9 hours in five of the seven consecutive years immediately preceding  
10 the date of his or her application under this section.

11 (5) Is not subject to disciplinary action as set forth in subdivision  
12 (h) of Section 3110. If the person has been subject to disciplinary  
13 action, the board shall review that action to determine if it presents  
14 sufficient evidence of a violation of this chapter to warrant the  
15 submission of additional information from the person or the denial  
16 of the application for licensure.

17 (6) Has furnished a signed release allowing the disclosure of  
18 information from the Healthcare Integrity and Protection Data  
19 Bank and, if applicable, the verification of registration status with  
20 the federal Drug Enforcement Administration. The board shall  
21 review this information to determine if it presents sufficient  
22 evidence of a violation of this chapter to warrant the submission  
23 of additional information from the person or the denial of the  
24 application for licensure.

25 (7) Has never had his or her license to practice optometry  
26 revoked or suspended.

27 (8) Is not subject to denial of an application for licensure based  
28 on any of the grounds listed in Section 480.

29 (9) Has met the minimum continuing education requirements  
30 set forth in Section 3059 for the current and preceding year.

31 (10) Has met the certification requirements of Section 3041.3  
32 to use therapeutic pharmaceutical agents under ~~subdivision (e) of~~  
33 Section 3041.

34 (11) Submits any other information as specified by the board  
35 to the extent it is required for licensure by examination under this  
36 chapter.

37 (12) Files an application on a form prescribed by the board,  
38 with an acknowledgment by the person executed under penalty of  
39 perjury and automatic forfeiture of license, of the following:



1 (A) That the information provided by the person to the board  
2 is true and correct, to the best of his or her knowledge and belief.

3 (B) That the person has not been convicted of an offense  
4 involving conduct that would violate Section 810.

5 (13) Pays an application fee in an amount equal to the  
6 application fee prescribed pursuant to subdivision (a) of Section  
7 3152.

8 (14) Has successfully passed the board's jurisprudence  
9 examination.

10 (b) If the board finds that the competency of a candidate for  
11 licensure pursuant to this section is in question, the board may  
12 require the passage of a written, practical, or clinical exam or  
13 completion of additional continuing education or coursework.

14 (c) In cases where the person establishes, to the board's  
15 satisfaction, that he or she has been displaced by a federally  
16 declared emergency and cannot relocate to his or her state of  
17 practice within a reasonable time without economic hardship, the  
18 board is authorized to do both of the following:

19 (1) Approve an application where the person's time in active  
20 practice is less than that specified in paragraph (4) of subdivision  
21 (a), if a sufficient period in active practice can be verified by the  
22 board and all other requirements of subdivision (a) are satisfied  
23 by the person.

24 (2) Reduce or waive the fees required by paragraph (13) of  
25 subdivision (a).

26 (d) Any license issued pursuant to this section shall expire as  
27 provided in Section 3146, and may be renewed as provided in this  
28 chapter, subject to the same conditions as other licenses issued  
29 under this chapter.

30 (e) The term "in good standing," as used in this section, means  
31 that a person under this section:

32 (1) Is not currently under investigation nor has been charged  
33 with an offense for any act substantially related to the practice of  
34 optometry by any public agency, nor entered into any consent  
35 agreement or subject to an administrative decision that contains  
36 conditions placed by an agency upon a person's professional  
37 conduct or practice, including any voluntary surrender of license,  
38 nor been the subject of an adverse judgment resulting from the  
39 practice of optometry that the board determines constitutes  
40 evidence of a pattern of incompetence or negligence.

1 (2) Has no physical or mental impairment related to drugs or  
2 alcohol, and has not been found mentally incompetent by a  
3 physician so that the person is unable to undertake the practice of  
4 optometry in a manner consistent with the safety of a patient or  
5 the public.

6 SEC. 7. Section 3110 of the Business and Professions Code is  
7 amended to read:

8 3110. The board may take action against any licensee who is  
9 charged with unprofessional conduct, and may deny an application  
10 for a license if the applicant has committed unprofessional conduct.  
11 In addition to other provisions of this article, unprofessional  
12 conduct includes, but is not limited to, the following:

13 (a) Violating or attempting to violate, directly or indirectly  
14 assisting in or abetting the violation of, or conspiring to violate  
15 any provision of this chapter or any of the rules and regulations  
16 adopted by the board pursuant to this chapter.

17 (b) Gross negligence.

18 (c) Repeated negligent acts. To be repeated, there must be two  
19 or more negligent acts or omissions.

20 (d) Incompetence.

21 (e) The commission of fraud, misrepresentation, or any act  
22 involving dishonesty or corruption, that is substantially related to  
23 the qualifications, functions, or duties of an optometrist.

24 (f) Any action or conduct that would have warranted the denial  
25 of a license.

26 (g) The use of advertising relating to optometry that violates  
27 Section 651 or 17500.

28 (h) Denial of licensure, revocation, suspension, restriction, or  
29 any other disciplinary action against a health care professional  
30 license by another state or territory of the United States, by any  
31 other governmental agency, or by another California health care  
32 professional licensing board. A certified copy of the decision or  
33 judgment shall be conclusive evidence of that action.

34 (i) Procuring his or her license by fraud, misrepresentation, or  
35 mistake.

36 (j) Making or giving any false statement or information in  
37 connection with the application for issuance of a license.

38 (k) Conviction of a felony or of any offense substantially related  
39 to the qualifications, functions, and duties of an optometrist, in

1 which event the record of the conviction shall be conclusive  
2 evidence thereof.

3 (l) Administering to himself or herself any controlled substance  
4 or using any of the dangerous drugs specified in Section 4022, or  
5 using alcoholic beverages to the extent, or in a manner, as to be  
6 dangerous or injurious to the person applying for a license or  
7 holding a license under this chapter, or to any other person, or to  
8 the public, or, to the extent that the use impairs the ability of the  
9 person applying for or holding a license to conduct with safety to  
10 the public the practice authorized by the license, or the conviction  
11 of a misdemeanor or felony involving the use, consumption, or  
12 self administration of any of the substances referred to in this  
13 subdivision, or any combination thereof.

14 (m) Committing or soliciting an act punishable as a sexually  
15 related crime, if that act or solicitation is substantially related to  
16 the qualifications, functions, or duties of an optometrist.

17 (n) Repeated acts of excessive prescribing, furnishing or  
18 administering of controlled substances or dangerous drugs specified  
19 in Section 4022, or repeated acts of excessive treatment.

20 (o) Repeated acts of excessive use of diagnostic or therapeutic  
21 procedures, or repeated acts of excessive use of diagnostic or  
22 treatment facilities.

23 (p) The prescribing, furnishing, or administering of controlled  
24 substances or drugs specified in Section 4022, or treatment without  
25 a good faith prior examination of the patient and optometric reason.

26 (q) The failure to maintain adequate and accurate records  
27 relating to the provision of services to his or her patients.

28 (r) Performing, or holding oneself out as being able to perform,  
29 or offering to perform, any professional services beyond the scope  
30 of the license authorized by this chapter.

31 (s) The practice of optometry without a valid, unrevoked,  
32 unexpired license.

33 (t) The employing, directly or indirectly, of any suspended or  
34 unlicensed optometrist to perform any work for which an optometry  
35 license is required.

36 (u) Permitting another person to use the licensee's optometry  
37 license for any purpose.

38 (v) Altering with fraudulent intent a license issued by the board,  
39 or using a fraudulently altered license, permit certification or any  
40 registration issued by the board.

(w) Except for good cause, the knowing failure to protect patients by failing to follow infection control guidelines of the board, thereby risking transmission of blood borne infectious diseases from optometrist to patient, from patient to patient, or from patient to optometrist. In administering this subdivision, the board shall consider the standards, regulations, and guidelines of the State Department of *Public Health Services* developed pursuant to Section 1250.11 of the Health and Safety Code and the standards, guidelines, and regulations pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing the transmission of HIV, hepatitis B, and other blood borne pathogens in health care settings. As necessary, the board may consult with the Medical Board of California, the Board of Podiatric Medicine, the Board of Registered Nursing, and the Board of Vocational Nursing and Psychiatric Technicians, to encourage appropriate consistency in the implementation of this subdivision.

(x) Failure or refusal to comply with a request for the clinical records of a patient, that is accompanied by that patient's written authorization for release of records to the board, within 15 days of receiving the request and authorization, unless the licensee is unable to provide the documents within this time period for good cause.

(y) Failure to refer a patient to an appropriate physician ~~in either of the following circumstances: where an examination of the eye indicates a substantial likelihood of any pathology that requires the attention of that physician.~~

~~(1) Where an examination of the eyes indicates a substantial likelihood of any pathology that requires the attention of that physician.~~

~~(2) As required by subdivision (c) of Section 3041.~~